

1999 FCC Form 499-S Telecommunications Reporting Worksheet

>>> Please read instructions before completing. <<<

Approval by OMB

3060-0855

Expires __/__/__

Short Form -- Universal Service Contributors only -- due September 1

Block 1: Contributor Identification Information		101	Filer 499 ID
102 Legal name of reporting entity			
103 IRS employer identification number			
104 Name telecommunications service provider is doing business as			
105 Principal communications business (check the one that best describes the reporting entity -- see directions)			
<input type="checkbox"/> CAP/CLEC <input type="checkbox"/> Cellular/PCS/SMR (wireless telephony incl. by resale) <input type="checkbox"/> Incumbent LEC <input type="checkbox"/> IXC			
<input type="checkbox"/> Local Reseller <input type="checkbox"/> OSP <input type="checkbox"/> Paging & Messaging <input type="checkbox"/> Payphone Service Provider			
<input type="checkbox"/> Pre-paid Card <input type="checkbox"/> Private Service Provider <input type="checkbox"/> Satellite			
<input type="checkbox"/> Shared Tenant Service Provider <input type="checkbox"/> SMR (dispatch) <input type="checkbox"/> Toll Reseller <input type="checkbox"/> Wireless Data			
If Other Local, Other Mobile or Other Toll is checked, <input type="checkbox"/> Other Local <input type="checkbox"/> Other Mobile <input type="checkbox"/> Other Toll			
describe carrier type / services provided:			
106 Holding company [All affiliated companies should show same name here]			
107 Complete mailing address of reporting entity corporate headquarters			

Block 2: Contact Information	
108 Person who completed this worksheet	
109 Telephone number of this person	() -
110 Fax number of this person	() -
111 E-mail of this person	
112 Corporate office, attn. name, and mailing address to which future Telecommunications Reporting Worksheets should be sent	
113 Billing address: [Bills for Universal Service contributions will be sent to this address.]	

Block 3: Contributor Revenue Information				
Filing Period	Billed revenue for January 1 through June 30 of 1999	Total Revenue	Percent Interstate & International	Interstate and International Revenue
		(a)	(b)	(c)
114	Revenue from service provided to other contributors for resale [Form 499-A lines 203 - 214]		%	
115	Contribution Revenues [Form 499-A lines 215 - 223 and 225 - 229]		%	
116	Other Revenues [Form 499-A lines 224 and 230]			
117	Gross billed revenue from all sources [sum of above]			

Block 4: CERTIFICATION: to signed by an officer of the filer	
118 I certify that the revenue data contained herein is privileged and confidential and that public disclosure of such information, would likely cause substantial harm to the competitive position of the company. I request nondisclosure of the revenue information contained herein pursuant to Sections 0.459, 52.17, 54.711 and 64.604 of the Commission's Rules. <input type="checkbox"/>	
I certify that I am an officer of the above-named reporting entity, that I have examined the foregoing report and to the best of my knowledge, information and belief, all statements of fact contained in this Worksheet are true and that said Worksheet is an accurate statement of the affairs of the above-named company for the previous calendar year.	
119 Signature	
120 Printed name of officer	
121 Position with reporting entity	
122 Date	
123 This filing is:	<input type="checkbox"/> Original filing <input type="checkbox"/> Revised filing [revisions due by April 1, 2000]

Do not mail checks with this form. Send this form to: Telecommunications Reporting Worksheet, Box _____, _____
For additional information regarding this worksheet contact: Telecommunications Reporting Worksheet information (xxx) TBA-xxxx

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. §1001

FCC Form 499-S
July 1999